### WHAT IS A SPEECH AND LANGUAGE EVALUATION?

A speech and language evaluation is a comprehensive assessment of a child’s communication skills carried out by a licensed speech-language pathologist (SLP). During an evaluation, an SLP assesses domains such as receptive language (i.e., understanding of language), expressive language (i.e., use of language), pragmatic language (i.e., social use of language), articulation (i.e., production of speech sounds), voice, resonance, and fluency. The length of an evaluation is dependent upon a child’s age, reason(s) for referral, language level, and number and type of assessments administered. While an evaluation for a 12-month-old may take an hour, one for a 14-year-old may take up to 3 hours or need to be carried out over multiple session dates.

### WHY IS A SPEECH AND LANGUAGE EVALUATION IMPORTANT?

Speech and language evaluations are invaluable, as they allow us to determine if speech therapy is warranted. They provide clinicians with the information needed to pinpoint a speech and language diagnosis/diagnoses (e.g., expressive language delay, childhood apraxia of speech, etc.) if one or more is appropriate. Additionally, evaluations allow SLPs to gather quantitative and qualitative information on a child’s strengths and areas of weakness that inform subsequent treatment and goals. They also provide baseline data on a child’s current speech and language skills that can then be used to measure progress and growth with therapy.

### WHEN SHOULD I SEEK OUT A SPEECH AND LANGUAGE EVALUATION?

You should seek out an evaluation if you are concerned about your child’s communication skills. Pursuing a speech and language evaluation doesn’t necessarily mean your child needs speech therapy. An evaluation will answer your questions about your child’s current language skills and the ways in which intervention may benefit your child if an SLP finds it to be warranted.

### HOW OFTEN SHOULD A CHILD RECEIVE A SPEECH AND LANGUAGE EVALUATION/RE-EVALUATION?

I always recommend an evaluation prior to starting therapy with a child unless they’ve recently received a comprehensive school-based or outpatient evaluation in the last 6 months. Taking into consideration a child’s age and language level, I typically recommend a speech and language evaluation every 6 months to 12 months. This allows us to document progress, reassess goals, and modify our therapeutic plan accordingly.

### WHAT IS INCLUDED IN THE EVALUATION PROCESS?

* **Reason for referral**: Before starting a speech and language evaluation, it is important for SLPs to understand a family’s reason for seeking out an evaluation. During this conversation, relevant background information and medical history is also obtained.
* **Play-based and behavioral observations**: Prior to starting any structured tasks, an SLP often observes how a child engages with familiar family members, how they respond to unfamiliar people, and how they play with toys, if applicable.
* [**Standardized testing**](https://www.asha.org/practice-portal/clinical-topics/late-language-emergence/assessment-tools-techniques-and-data-sources/): Regardless of a child’s age and ability level, it is critical to administer standardized testing measures that allow us to gain in-depth information on a child’s current speech and language skills as compared to peers. Standardized tests must be selected carefully and take into account factors such as language, culture, and hearing and vision status that may impact a child’s performance.
* **Informal assessment**: While standardized tests are an important component of speech and language evaluations, they certainly don’t paint the whole picture. I always encourage families to interpret standardized testing scores with a grain of salt. For this exact reason, it’s also crucial to incorporate informal assessment during an evaluation. Informal assessments don’t provide us with standard scores or percentile ranks, but they allow us to observe how a toddlers engages with toys or how a school-age child participates in conversation. Often times, I do some “trial therapy” during my evaluations to see how a kiddo responds to therapeutic activities.
* **Summary of findings:** After an evaluation is complete, an SLP will review a summary of their findings with families. This should include results of both standardized testing and informal assessments, a review of speech and language diagnosis/diagnoses if one or more is appropriate, a discussion of whether speech therapy is warranted, and a conversation surrounding necessary referrals (e.g., audiology, ENT etc.). After the evaluation, SLPs should provide a written report containing all this information as well as recommended goals for therapy and strategies to implement at home.

**Assessment Tools, Techniques, and Data Sources**

Following is a list of assessment tools, techniques, and data sources that can be used to assess speech and language ability. Clinicians select the most appropriate method(s) and measure(s) to use for a particular individual, based on his or her age, cultural background, and values; language profile; severity of suspected communication disorder; and factors related to language functioning (e.g., hearing loss and cognitive functioning).

Standardized Assessments

Standardized assessments are empirically developed evaluation tools with established statistical reliability and validity. A standardized test is one that requires all test takers to answer the same items/questions in the same way and that is scored in a standard or consistent way, thus making it possible to compare the relative performance of individuals or groups of individuals. There are two types of standardized assessment instruments: norm-referenced and criterion-referenced.

**Norm-Referenced Tests**

Norm-referenced tests are standardized tests designed to compare and rank test takers in relation to one another. Using a norm-referenced test makes it possible to compare an individual's score(s) with those of a large group of statistically selected individuals—usually of the same age or grade level—who have already taken the test. A norm-referenced score is typically reported as a percentile ranking. For example, an individual who scores in the 90th percentile has performed as well as or better than 90% of other test takers of the same age or grade level (i.e., those in the norming group).

**Criterion-Referenced Tests**

Criterion-referenced tests are standardized tests that measure an individual's performance against a set of predetermined criteria or performance standards (e.g., descriptions of what an individual is expected to know or be able to do at a specific stage of development or level of education). In educational settings, criterion-referenced tests may be used to assess whether the student has learned a specific body of knowledge. It is possible, and in fact desirable, for an individual to pass or earn a perfect score on a criterion-referenced test.

Criterion-referenced procedures can also be developed informally to address specific questions (e.g., understanding of wh- questions, automatic recognition of grade-appropriate words in print) and to assess response to intervention (RTI).

**Selecting and Interpreting Standardized Assessments**

Coexisting disorders or diagnoses are considered when selecting standardized assessment tools, as deficits may vary from population to population (e.g., ADHD, TBI, ASD). In addition, standardized tests should be culturally and linguistically appropriate.  Standard scores should not be determined if the norming sample does not adequately represent the individual being assessed. It is essential to consider the language spoken and/or dialect used by the child before selecting a standardized assessment. Translation of a standardized assessment invalidates the results. Standard scores cannot be reported when the assessment has been translated. See [cultural responsiveness](https://www.asha.org/practice-portal/professional-issues/cultural-responsiveness/) and [bilingual service delivery](https://www.asha.org/practice-portal/professional-issues/bilingual-service-delivery/). In such cases a clinician can use available standardized language assessments for children who speak languages other than English.

Parent/Teacher/Self-Report Measures

Parent, teacher, and self-report measures include rating scales, checklists, inventories, and questionnaires completed by the family members/caregiver, teacher, or individual. Findings from multiple sources (e.g., family vs. teacher vs. self-report) may be compared to obtain a comprehensive profile of communication skills. For individuals who speak a language other than English in the home, the clinician needs to gather detailed information about use of the primary language and English. When possible, checklists should be made available in the person's native language to obtain the most accurate information.

Ethnographic Interviewing

Ethnographic interviewing is a technique that uses open-ended questions, restatement, and summarizing for clarification for obtaining information from the perspective of the individual and other people in his or her environment (e.g., family members/caregiver, teacher). The technique avoids the use of leading questions and "why" questions. Ethnographic interviewing can be used to validate other assessment findings.

Clinicians should refrain from creating assumptions about individuals or families based on general cultural, ethnic, or racial information. Ethnographic interviewing can be used to gather specific knowledge of the views of clients and their families, including cultural and linguistic variables. See Westby, Burda, and Mehta (2003) and [cultural responsiveness](https://www.asha.org/practice-portal/professional-issues/cultural-responsiveness/).

Observation Techniques

**Analog Tasks**

Analog tasks involve observation of the individual in simulated or staged communication contexts that mimic real-world events, including peer group activities and simulated workplace interactions.

**Naturalistic Observation**

Naturalistic observation is observation of the individual in everyday social settings with others, including academic settings. Criterion-referenced assessments may be used during naturalistic observations to document an individual's functional use of language across social situations.

**Systematic Observation and Contextual Analysis**

Systematic observation and contextual analysis involve observation across a variety of contexts (e.g., settings and tasks) to obtain descriptions of language functioning and identify specific problem areas and contextual variables that play a part in the individual's communication abilities. Systematic observation along with contextual analysis can be used to complement findings from other assessment procedures.

Language Sampling

Language sampling techniques are used to elicit spontaneous language in various communication contexts (e.g., free play, conversation/dialogue, narration, expository speech) and then derive measures (e.g., Mean Length of Utterance [MLU], Type-Token Ratio [TTR], Developmental Sentence Scoring [DSS], clausal density, use of subordinate clauses) to complement data obtained from standardized language assessments.

Dynamic Assessment

Dynamic assessment is a method in which an individual is tested, skills are addressed, and then the individual is retested to determine treatment outcome (i.e., test, teach and retest). [Dynamic assessment](https://www.asha.org/practice/multicultural/dynamic-assessment/) can help distinguish between a language difference and a language disorder and can be used in conjunction with standardized assessments and language sampling.

Curriculum-Based Assessment

Curriculum-based assessment is used to determine the language demands of the curriculum and to assess the student's ability to meet those demands. The technique is based on the curriculum the student is currently mastering and may utilize materials being used in the student's classroom. The assessment can come directly from a textbook (e.g., a chapter test), or it can involve the use of probes or other types of direct assessment. Curriculum-based assessment results can be used to develop instructional goals and to evaluate the student's progress in developing competence with the language of the curriculum.

References

Westby, C., Burda, A., & Mehta, Z. (2003, April 29). Asking the right questions in the right ways: Strategies for ethnographic interviewing.*The ASHA Leader*.